



**BlueCross BlueShield  
of Illinois**

# Blue Cross and Blue Shield of Illinois Provider Manual

## Electronic Commerce

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## Electronic Commerce Overview

Electronic Commerce involves information that is stored, displayed or transmitted electronically. Utilizing Electronic Commerce in day-to-day business operations is necessary for the secure and standardized exchange of clinical data between patients, providers, health plans and other health care stakeholders. BCBSIL offers a growing list of Electronic Commerce options – online, self-service tools, resources and support services – to assist you with providing health care services to your patients. It is important to take advantage of all Electronic Commerce options that are available to you as a network provider to help you remain competitive, as well as compliant, in some cases, with contractual and/or other requirements.

**Our Participating Provider Agreements now include the following statement that supports the importance of participating in electronic transactions:**

*The PPO Plus Provider agrees to use his/her best efforts to participate with the Plan's Electronic Funds Transfer (EFT) under the terms and conditions set forth on the Electronic Funds Transfer Agreement. The PPO Plus Provider also agrees to use his/her best efforts to participate with the Plan's Electronic Remittance Advice (ERA) as described in the Electronic Remittance Advice (ERA) Enrollment.*

**Please note:** This Provider Manual is incorporated by reference into the PPO and Blue HPN<sup>SM</sup> contract of all professional providers. As such, the language above applies to all existing professional PPO and Blue HPN providers, effective Oct. 1, 2010.

## Electronic Commerce Transactions

Doing business electronically with BCBSIL involves Electronic Data Interchange (EDI), the computer-to-computer transmission of standardized information. EDI transactions are often identified by numbers assigned by the American National Standards Institute (ANSI). Listed below are some of the administrative, clinical and financial electronic solutions offered and/or supported by BCBSIL. Please note that, for most electronic options, you will need to utilize an approved independent third party vendor that can provide a secure connection to BCBSIL – see the Electronic Commerce Vendors listing at the end of this section for details.

### Eligibility and Benefits Request (ANSI 270/271)

Before rendering services to our members, it is critical that you check participation and coverage details according to the member's benefit plan. You can verify BCBSIL and other commercial and government payers' membership and eligibility at a single location through Availity<sup>®</sup> or your preferred electronic vendor portal. This step also helps you confirm benefit prior authorization requirements and other important information. Refer to the [Eligibility and Benefits page](#) in the Claims and Eligibility section of our Provider website for helpful resources, such as user guides to help you navigate the Availity portal.

### Electronic Prior Authorization (Availity<sup>®</sup> Authorizations)

Authorizations is our online tool that allows the electronic submission of inpatient admissions and select outpatient services handled by BCBSIL. Additionally, providers can also check status on previously submitted requests and/or update applicable existing requests. Availity Authorizations is accessible to physicians, professional providers and facilities who have established a provider record with BCBSIL. For more information about the [Availity Authorizations tool](#), visit the Education and Reference Center/Provider Tools section of our website.

### Online Member Liability Estimator (MLE)

Online MLE tools are available via the Availity portal to help provide you with the opportunity to collect **estimated** patient financial responsibility at the time of service. Visit the Education and Reference/Provider Tools section of our website for additional information, such as the [Availity Patient Cost Estimator user guide](#).

### Electronic Health Record/Patient Clinical Summary

Registered Availity users may access the Availity Patient Care Summary tool, which uses claim-based information to provide you with a consolidated view of a member's medical history at the point of care. This payer-based electronic health record can help you identify gaps in care, missed prescription refills and possible drug interactions, and other "clinical flags" and treatment opportunities. Visit the Education and Reference/Provider Tools section of our website for additional information, such as the [Availity Patient Care Summary user guide](#).

### **Electronic Claim Submission (ANSI 837)**

You can submit claims electronically, real-time or in batch, 24 hours a day, seven days a week. Electronic claim submission enables users to have same-day access to their batch reports, which allows for quicker error resolution and also expedites the overall revenue management cycle process. All BCBSIL institutional or facility (UB-04) and professional (CMS-1500) claims can be filed electronically using your preferred electronic clearinghouse or practice management system. You may also file electronically at no charge through the [Availity website](#). For additional information on the no cost Availity solution, visit the Education and Reference/Provider Tools section of our website for additional information, such as the [Electronic Claim Submission via Availity Provider Portal page](#).

### **Claim Status Request (ANSI 276/277)**

After submission, check claim status online and in real-time for BCBSIL and other commercial payer and government claims using Availity or your preferred electronic vendor. For enhanced claim status capability, such as status of multiple claims in one view and expanded search options, registered Availity users may access the Claim Status Tool on the [Availity website](#). Visit the [Education and Reference Center/Provider Tools](#) section of our website for additional information, such as the [Claim Status Tool user guide](#).

### **Electronic Funds Transfer (EFT) (ANSI 835 EFT)**

EFT is a secure method to receive claims payment, allowing BCBSIL to electronically transfer your claim reimbursement funds directly into the bank account of your choice. Enrollment allows you the option of selecting daily EFTs or a weekly payment schedule for commercial claims. Additional information, such as how to enroll for EFT online through Availity, is available in the [Claims and Eligibility/Electronic Payment and Remittance section](#) of our website.

### **Electronic Remittance Advice (ERA) (ANSI 835 ERA)**

The purpose of this HIPAA-compliant data file is to facilitate automated posting of payments to your patient accounting system. You must be a registered [Availity](#) user to receive the ERA from BCBSIL. Additional information, such as how to enroll online for ERA, is available in the [Claims and Eligibility/Electronic Payment and Remittance section](#) of our website.

### **Remittance Viewer**

The remittance viewer offers providers and billing services a convenient way to view and help reconcile claim data provided by BCBSIL in the 835 ERA. You must be a registered [Availity](#) user to gain access to the remittance viewer tool. For additional information, such as a [Remittance Viewer user guide](#), refer to the Education and Reference Center/Provider Tools section of our website.

### **Electronic Payment Summary (EPS)**

When you enroll for the ERA, you automatically receive the EPS, which is an electronic version of the paper Provider Claim Summary (PCS). The EPS is received in your office the day after the claim has been finalized, and you may use the EPS as an added tool when reconciling your BCBSIL payments. **Note:** The EPS cannot be used for automatic posting and is only available in combination with the ERA.

### **Reporting-On-Demand**

The Reporting On-Demand application allows users to readily view, download, save and/or print the PCS online, at no additional cost. You must be registered with [Availity](#) to gain access to this tool. For additional information, such as a [Reporting-On-Demand user guide](#), refer to the Education and Reference Center/Provider Tools section of our website.

### **Clear Claim Connection™**

[Clear Claim Connection \(C3\)](#) is a free online reference tool that mirrors the logic behind BCBSIL's ClaimsXten™ code-auditing software. You can use C3 to help determine how coding combinations on a particular claim may be evaluated during the adjudication process. To gain access to C3, you must be registered with [Availity](#). For additional information, including an instruction document to assist you with using C3, visit the [Education and Reference Center/Provider Tools section](#) of our website.

## Electronic Refund Management (eRM)

Electronic Refund Management (eRM) is an online tool that can help simplify your overpayment reconciliation and related processes. Prior to accessing eRM, you must be registered with [Availity](#). A detailed explanation of eRM, its functionality and benefits is included in the Billing and Reimbursement section of this Provider Manual. Also refer to the Education and Reference Center/Provider Tools section of our website [for additional information on eRM](#).

## Electronic Commerce Vendors

See below for an example of a multi-payer independent third party vendor portal that can help provide a secure electronic gateway between your office and BCBSIL for the exchange of real-time member/claim-related health care data. Prior to conducting EDI transactions, you will need to confirm services are available and register with your selected vendor. In some cases, there may be a fee for services.

### Availity

Availity provides access to eligibility and benefits, claim status, claims clearinghouse services and more via the internet. To register with Availity or learn more about services available to BCBSIL contracted providers, visit the [Availity website](#) at [availity.com](#), or call Availity Client Services at 800-282-4548.

## Provider Learning Opportunities

The list of electronic options we support and make available for providers continues to expand. This section of our Provider Manual provides just a brief overview. Also watch for additional information and announcements in the [Blue Review](#), as well as the [News and Updates](#) section of our website at [bcbsil.com/provider](#). Or join us for a complimentary training session – refer to the [Webinars/Workshops page](#) in the Education and Reference Center on our Provider website for dates, times and online registration for upcoming sessions.

**Verification of eligibility and/or benefit information and/or the fact that a guideline is available for any given treatment, or that a service has received prior authorization, is not a guarantee of payment of benefits. Payment of benefits is subject to several factors, including, but not limited to, eligibility at the time of service, payment of premiums/contributions, amounts allowable for services, supporting medical documentation and other terms, conditions, limitations and exclusions set forth in the member's policy certificate and/or benefits booklet and/or summary plan description as well as any pre-existing conditions waiting period, if any.**

Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSIL. ClaimsXten and Clear Claim Connection are trademarks of Change Healthcare, an independent company providing coding software to BCBSIL. Change Healthcare is solely responsible for the software and all the contents. Contact the vendor directly with any questions about the products, software and services they provide. BCBSIL makes no endorsement, representations or warranties regarding any products or services provided by third party vendors such as Availity and Change Healthcare. If you have any questions about the products or services provided by such vendors, you should contact the vendor(s) directly.

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